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## BIB DATA SHEET

CONFIRMATION NO. 7196

<b>SERIAL NUMBER</b> 10/748,811	<b>FILING or 371(c) DATE</b> 12/30/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 51640/AW/W112	
<b>APPLICANTS</b> Kristine B. Fuimaono, Covina, CA; Irma Hill, LaVerne, CA; <b>** CONTINUING DATA *****</b> This application is a DIV of 09/692,494 10/19/2000 PAT 6,905,495 which is a CIP of 09/370,601 08/10/1999 PAT 6,852,120 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/29/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /LAURA A BOUCHELLE/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> CHRISTIE, PARKER & HALE, LLP PO BOX 7068 PASADENA, CA 91109-7068 UNITED STATES					
<b>TITLE</b> Irrigation probe for ablation during open heart surgery					
<b>FILING FEE RECEIVED</b> 948	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		